

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY
STATUS (37 CFR 1.9(f) and 1.27(b)) - INDEPENDENT INVENTOR

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled COMPOSITIONS AND METHODS FOR TREATING described in HEREDITARY DEGENERATIVE DISEASES

- ☒ the specification filed herewith
☐ application serial no. _____, filed _____
☐ patent no. _____, issued _____

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- ☒ no such person, concern, or organization
☐ persons, concerns or organizations listed below*

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

FULL NAME _____
ADDRESS _____
☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION


FULL NAME _____
ADDRESS _____
☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

FULL NAME _____
ADDRESS _____
☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Peter K. Law

NAME OF INVENTOR	NAME OF INVENTOR	NAME OF INVENTOR
		
Signature of Inventor	Signature of Inventor	Signature of Inventor

**RULE 63 (37 C.F.R. 1.63)
DECLARATION AND POWER OF ATTORNEY
FOR PATENT APPLICATION**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

As a below named inventor, I hereby declare that my residence, post office address and citizenship are as stated below next to my name, and I believe I am the original, first and sole inventor (if only one name listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled MYOBLAST THERAPY FOR MAMMALIAN DISEASES
the specification of which (check applicable box(es)):

☐ is attached hereto.

☒ was filed on June 7, 1995

as U.S. Application Serial No. 08/477,377

☐ was filed as PCT international application No. PCT/_____/_____
and (if applicable to U.S. or PCT application) was amended on _____ on _____

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with 37 C.F.R. 1.56(a). I hereby claim foreign priority benefits under 35 U.S.C. 119/365 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed or, if no priority is claimed, before the filing date of this application:

Prior Foreign Application(s):

Application Number

Country

Day/Month/Year Filed

I hereby claim the benefit under 35 U.S.C. 120/365 of all prior United States and PCT international applications listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in such prior application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose material information as defined in 37 C.F.R. 1.56(a) which occurred between the filing date of the prior applications and the national or PCT international filing date of this application:

Prior U.S./PCT Application(s):

Application Serial No.

Date/Month/Year Filed

Status: patented,
pending, abandoned

08/354,944

12/13/94

Pending

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

And I hereby appoint the firm of Rhodes, Coats & Bennett, comprising C. Robert Rhodes, Reg. No. 24,200, Edward W. Rilee, Reg. No. 31,869, Howard A. MacCord, Jr., Reg. No. 28,639, Jack B. Hicks, Reg. No. 34,180, David D. Beatty, Reg. No. 38,071, Pat Winston Kennedy, Reg. No. 36,970, James L. Lester, Reg. No. 38,721, Larry L. Coats, Reg. No. 25,620, David E. Bennett, Reg. No. 32,194, and William J. Mason, Reg. No. 22,948, as my attorneys and/or agents with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent Office connected therewith. Address all communications and telephone calls to: Rhodes, Coats & Bennett, P.O. Box 2974, Greensboro, North Carolina 27402, (910) 273-4422.

1) Inventor's Signature X Peter K Law Date X 8/23/95

Inventor's Name (typed) Peter K Law Canadian
First Middle Initial Family Name Citizenship

Residence (City) Memphis (State/Foreign Country) Tennessee

Post Office Address 1770 Moriah Woods Blvd., Suite 18 Zip Code 38117

2) Inventor's Signature _____ Date _____

Inventor's Name (typed) _____
First Middle Initial Family Name Citizenship

Residence (City) _____ (State/Foreign Country) _____

Post Office Address _____ Zip Code _____

3) Inventor's Signature _____ Date _____

Inventor's Name (typed) _____
First Middle Initial Family Name Citizenship

Residence (City) _____ (State/Foreign Country) _____

Post Office Address _____ Zip Code _____

FOR ADDITIONAL INVENTORS, check box ☐ and attach sheet with same information and signature and date for each.
Rhodes, Coats & Bennett (9/94)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re patent application of

Peter LAW

Serial No. 08/477,377

Group Art Unit: 180

Filed: June 7, 1995

Examiner: Deborah Crouch

For: MYOBLAST THERAPY FOR MAMMALIAN DISEASES

APPOINTMENT OF ATTORNEY

Honorable Commissioner
of Patents and Trademarks
Washington, D.C. 20231

Sir:

The undersigned sole inventor of the above-identified application hereby revokes all previous powers of attorney and appoints the following attorneys with full powers of substitution and revocation to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Arthur Schwartz, Reg. No. 22,115;
Donald D. Jeffery, Reg. No. 19,980;
Richard L. Schwaab, Reg. No. 25,479;
Peter G. Mack, Reg. No. 26,001;
David A. Blumenthal, Reg. No. 26,257;
John J. Feldhaus, Reg. No. 28,822;
Stephen A. Bent, Reg. No. 29,768;
Bernhard D. Saxe, Reg. No. 28,665;
Colin Sandercock, Reg. No. 31,298;
Charles Schill, Reg. No. 27,590;
Eugene Lee, Reg. No. 32,039;
Brian McNamara, Reg. No. 32,789;
Sybil Meloy, Reg. No. 22,749;
George Quillin, Reg. No. 32,792; and
Hal Wegner, Reg. No. 25,258

Please send all correspondence to:

FOLEY & LARDNER
3000 K Street, N.W.
Washington, D.C. 20007-5109.

This 26th day of March, 1996

Respectfully submitted,

By: Peter K. Law
Dr. Peter Law

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